

Registration Form – Also available online at www.holstoncamping.com

If you prefer to pay with a credit card, please register online or call 423/929-9037, ext. 235 or ext 236, Monday through Friday, 10 AM – 6 PM.

PLEASE PRINT

Camper Name: _____

First Last

1ST Choice: Campsite _____ Date of Session _____ Session Title _____ Session # _____

2ND Choice: Campsite _____ Date of Session _____ Session Title _____ Session # _____

3RD Choice: Campsite _____ Date of Session _____ Session Title _____ Session # _____

Registering Parent/Guardian/Contact:

Name: _____

Address: _____

Street/Route City State Zip

Phone: Home () _____ Day () _____ Cell () _____

E-mail Address: _____

Second Parent/Guardian/Contact: (name) _____

Phone: Home () _____ Day () _____ Cell () _____

Camper Information

Gender: _____ Birth Date: _____ Age: _____ School Grade in Fall 2012: _____ Race: _____

Month Day Year

Buddy Request: _____

Church Home: (Name) _____ (City) _____

Denomination or Religious Affiliation: _____



**Holston United Methodists:
Circle Your District**

- | | |
|---------------|------------|
| Abingdon | Knoxville |
| Big Stone Gap | Maryville |
| Chattanooga | Morristown |
| Cleveland | Oak Ridge |
| Johnson City | Tazewell |
| Kingsport | Wytheville |

Source of Payments: (List all Payments, Camperships)

Name of Payee	Amount	Check #, Campership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total = \$ _____

Payments:

Cost of Camp Session _____

Minus Early Bird Discount _____

Minus Recruit a New Camper Discount* _____

Net Cost of Camp Session _____

+ Donation to Scholarship Fund _____

TOTAL PAYMENT _____

*New Camper's Name _____

Make check payable to Holston Conference CRM and send with registration form to:

**REGISTRAR
HOLSTON CONFERENCE CRM
P.O. BOX 2506
JOHNSON CITY, TN 37605-2506**